P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Test Compound: 4-Methylimidazole

**CAS Number:** 822-36-6

Species/Strain: Rat/F 344/N

Test Type: 14-DAY

Route: DOSED FEED

C Number: C92013

**Lock Date:** 01/12/1995

Cage Range: All

Date Range: All

Reasons For Removal:

Removal Date Range: All

Treatment Groups: All

Study Gender: Both

PWG Approval Date NONE

Date Report Requested: 10/22/2014 Time Report Requested: 06:25:41

First Dose M/F: NA / NA

Lab: MBA

Test Type: 14-DAY

Route: DOSED FEED Species/Strain: Rat/F 344/N P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Test Compound: 4-Methylimidazole **CAS Number:** 822-36-6

First Dose M/F: NA / NA

Lab: MBA

Date Report Requested: 10/22/2014

Time Report Requested: 06:25:41

F 344/N Rat Male **VEHICLE CONTROL** 

**Alimentary System** 

DAY ON TEST	0	0	0	0	0
	<i>1</i> 5	<i>1</i> 5	<i>1</i> 5	<i>1</i> 5	<i>1</i> 5
ANIMAL ID	0 0 0 0	0 0 0 0 2	0 0 0 0 3	0 0 0 0 4	0 0 0 0 5

\*TOTALS

5 5 5

5

5

Liver	+	+	+	+	+
Stomach, Forestomach	+	+	+	+	+
Stomach, Glandular	+	+	+	+	+
Cardiovascular System					
Heart	+	+	+	+	+
Endocrine System					

Adrenal Cortex	+	+	+	+	+	5
Adrenal Medulla	+	+	+	+	+	5
Pituitary Gland	+	+	+	+	+	5
Thyroid Gland	+	+	+	+	+	5

# **General Body System**

NONE

## **Genital System**

Testes	+	+	+	+	+		;
lamatanaistia Custam							

# **Hematopoietic System**

Spleen	+	+	+	+	+	5
Thymus	+	+	+	+	+	5

**Integumentary System** 

I .. Insufficient tissue

<sup>\* ..</sup>Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup> Tissue examined microscopically

X ..Lesion present

M .. Missing tissue

A .. Autolysis precludes evaluation

P04: NEOPLASMS BY INDIVIDUAL ANIMAL Test Compound: 4-Methylimidazole

**CAS Number:** 822-36-6

Date Report Requested: 10/22/2014 Time Report Requested: 06:25:41

First Dose M/F: NA / NA

Lab: MBA

Route: DOSED FEED Species/Strain: Rat/F 344/N

Test Type: 14-DAY

F 344/N Rat Male VEHICLE CONTROL	DAY ON TEST	0 0 1 5 0 0	0 0 1 5	0 0 1 5 0 0	0 0 1 5	0 0 1 5	
		0 0 1	0 0 2	0 0 3	0 0 4	0 0 5	
NONE							

\*TOTALS

5

5

5

5

### **Musculoskeletal System**

NONE

Nervous System						
Brain	+	+	+	+	+	į
Respiratory System						
Lung	+	+	+	+	+	į
Special Senses System						
NONE						
Urinary System						
Kidney	+	+	+	+	+	į
SYSTEMIC LESIONS						
Multiple Organ	+	+	+	+	+	į

M .. Missing tissue

A .. Autolysis precludes evaluation

<sup>\* ..</sup>Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup> Tissue examined microscopically

X ..Lesion present

I .. Insufficient tissue

Test Type: 14-DAY
Route: DOSED FEED

Species/Strain: Rat/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Test Compound:** 4-Methylimidazole **CAS Number:** 822-36-6

First Dose M/F: NA / NA

Date Report Requested: 10/22/2014

Time Report Requested: 06:25:41

Lab: MBA

DAY ON TEST

F 344/N Rat Male 300 PPM

ANIMAL ID

\*TOTALS

**Alimentary System** 

NONE

**Cardiovascular System** 

NONE

**Endocrine System** 

NONE

**General Body System** 

NONE

**Genital System** 

NONE

**Hematopoietic System** 

NONE

**Integumentary System** 

NONE

Musculoskeletal System

NONE

**Nervous System** 

NONE

I .. Insufficient tissue

M ..Missing tissue
A ..Autolysis precludes evaluation
BLANK ..Not examined microscopically

<sup>\* ..</sup>Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup> Tissue examined microscopically

X ..Lesion present

Test Type: 14-DAY
Route: DOSED FEED

Species/Strain: Rat/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Test Compound:** 4-Methylimidazole **CAS Number:** 822-36-6

First Dose M/F: NA / NA

Date Report Requested: 10/22/2014

Time Report Requested: 06:25:41

Lab: MBA

DAY ON TEST

F 344/N Rat Male 300 PPM

ANIMAL ID

\*TOTALS

**Respiratory System** 

NONE

**Special Senses System** 

NONE

**Urinary System** 

NONE

**SYSTEMIC LESIONS** 

Multiple Organ 0

M ..Missing tissue

A .. Autolysis precludes evaluation

<sup>\* ..</sup>Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup> Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

Test Type: 14-DAY
Route: DOSED FEED

Species/Strain: Rat/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Test Compound:** 4-Methylimidazole **CAS Number:** 822-36-6

First Dose M/F: NA / NA

Date Report Requested: 10/22/2014

Time Report Requested: 06:25:41

Lab: MBA

DAY ON TEST

F 344/N Rat Male 800 PPM

ANIMAL ID

\*TOTALS

**Alimentary System** 

NONE

**Cardiovascular System** 

NONE

**Endocrine System** 

NONE

**General Body System** 

NONE

**Genital System** 

NONE

**Hematopoietic System** 

NONE

**Integumentary System** 

NONE

Musculoskeletal System

NONE

**Nervous System** 

NONE

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation BLANK ..Not examined microscopically

<sup>\* ..</sup>Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup> Tissue examined microscopically

X ..Lesion present

**Test Type:** 14-DAY **Route:** DOSED FEED

Species/Strain: Rat/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Test Compound: 4-Methylimidazole

**CAS Number:** 822-36-6

Date Report Requested: 10/22/2014 Time Report Requested: 06:25:41

First Dose M/F: NA / NA

Lab: MBA

DAY ON TEST

F 344/N Rat Male 800 PPM

ANIMAL ID

\*TOTALS

**Respiratory System** 

NONE

**Special Senses System** 

NONE

**Urinary System** 

NONE

**SYSTEMIC LESIONS** 

Multiple Organ 0

I .. Insufficient tissue

M ..Missing tissue

A .. Autolysis precludes evaluation

<sup>\* ..</sup>Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup> Tissue examined microscopically

X ..Lesion present

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Test Compound: 4-Methylimidazole

Route: DOSED FEED Species/Strain: Rat/F 344/N

Test Type: 14-DAY

**CAS Number:** 822-36-6

Date Report Requested: 10/22/2014

Time Report Requested: 06:25:41

First Dose M/F: NA / NA

Lab: MBA

F 344/N Rat Male 2500 PPM

DAY ON TEST	0	0	0	0	0
	0	0	0	0	0
	1	1	1	1	1
	5	5	5	5	5
ANIMAL ID	0	0	0	0	0
AMIMAL ID	0	0	0	0	0
	0	0	0	0	0
	1	1	1	1	2
	6	7	8	9	0

	1	1	1	1	2	
	6	7	8	9	0	*TOTALS
Alimentary System						
Liver	+	+	+	+	+	5
Stomach, Forestomach	+	+	+	+	+	5
Stomach, Glandular	+	+	+	+	+	5
Cardiovascular System						
Heart	+	+	+	+	+	5
Endocrine System						
Adrenal Cortex	+	+	+	+	+	5
Adrenal Medulla	+	+	+	+	+	5
Pituitary Gland	+	+	+	+	+	5
Thyroid Gland	+	+	+	+	+	5
General Body System						
NONE						
Genital System						
Testes	+	+	+	+	+	5
Hematopoietic System						
Spleen	+	+	+	+	+	5
Thymus	+	+	+	+	+	5
Integumentary System						

M .. Missing tissue

A .. Autolysis precludes evaluation

<sup>\* ..</sup>Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup> Tissue examined microscopically

X ..Lesion present

I .. Insufficient tissue

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Test Compound:** 4-Methylimidazole

Date Report Requested: 10/22/2014

Time Report Requested: 06:25:41

First Dose M/F: NA / NA

Lab: MBA

**CAS Number:** 822-36-6

Species/Strain: Rat/F 344/N

Test Type: 14-DAY

Route: DOSED FEED

F 344/I	N Rat	Male
2500	PPM	

DAY ON TEST	0	0	0	0	0	
	<i>I</i> 5					
A N II N A A I . I D	0	0	0	0	0	
ANIMAL ID	0	0	0	0	0	
	0	0	0	0	0	
	1	1	1	1	2	
	6	7	8	9	0	

	ANIMAL ID	0 0 1 6	0 0 1 7	0 0 1 8	0 0 1 9	0 0 2 0	*TOTALS
NONE Musculoskeletal System				•			
NONE Nervous System							
Brain Respiratory System		+	+	+	+	+	5
Lung Special Senses System		+	+	+	+	+	5
NONE Urinary System							
Kidney SYSTEMIC LESIONS		+	+	+	+	+	5
Multiple Organ		+	+	+	+	+	5 ***END OF MALE DATA***

M ..Missing tissue

A .. Autolysis precludes evaluation

 $<sup>^{\</sup>star}\,$  ..Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup>Tissue examined microscopically

X ..Lesion present

I .. Insufficient tissue

Test Type: 14-DAY

Route: DOSED FEED Species/Strain: Rat/F 344/N

**Alimentary System** 

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Test Compound: 4-Methylimidazole

**CAS Number:** 822-36-6

First Dose M/F: NA / NA

Date Report Requested: 10/22/2014

Time Report Requested: 06:25:41

Lab: MBA

F 344/N Rat Female **VEHICLE CONTROL** 

DAY ON TEST	0	0	0	0	0
	0	0	0	0	0
	1	1	1	1	1
	5	5	5	5	5
ANIMAL ID	0	0	0	0	0
AMINAL ID	0	0	0	0	0
	0	0	0	0	0
	2	2	2	2	2 5
	1	2	3	4	5

\*TOTALS

5 5 5

5

Liver	+	+
Stomach, Forestomach	+	+
Stomach, Glandular	+	+
Cardiovascular System		

Heart **Endocrine System** 

**Adrenal Cortex** 5 5 Adrenal Medulla Pituitary Gland 5

Thyroid Gland 5

**General Body System** 

NONE

**Genital System** 

5 Ovary

**Hematopoietic System** 

Spleen 5 Thymus 5

**Integumentary System** 

M .. Missing tissue

A .. Autolysis precludes evaluation

<sup>\* ..</sup>Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup> Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

Test Type: 14-DAY

Route: DOSED FEED

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Test Compound: 4-Methylimidazole

**CAS Number:** 822-36-6

First Dose M/F: NA / NA

Date Report Requested: 10/22/2014

Time Report Requested: 06:25:41

Lab: MBA

F 344/N Rat Female **VEHICLE CONTROL** 

Species/Strain: Rat/F 344/N

DAY ON TEST	0	0	0	0	0
	5	5	5	5	5
A N II M A A I I I I I I	^	0	0	0	0
ANIMAL ID	Ö	Ö	Ö	Ö	Ö
	0	0	0	0	0
	0 2	2	2	2	0 2 5
	1	2	3	4	5

\*TOTALS

NONE

### **Musculoskeletal System**

NONE

Nervous System						
Brain	+	+	+	+	+	5
Respiratory System						
Lung	+	+	+	+	+	5
Special Senses System						
NONE						
Urinary System						
Kidney	+	+	+	+	+	5
SYSTEMIC LESIONS						
Multiple Organ	+	+	+	+	+	5

M .. Missing tissue

A .. Autolysis precludes evaluation

<sup>\* ..</sup>Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup> Tissue examined microscopically

X ..Lesion present

I .. Insufficient tissue

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Test Compound: 4-Methylimidazole

**CAS Number:** 822-36-6

Time F

**Date Report Requested:** 10/22/2014

Time Report Requested: 06:25:41 First Dose M/F: NA / NA

Lab: MBA

Test Type: 14-DAY
Route: DOSED FEED

Species/Strain: Rat/F 344/N

F 344/	N Rat	Female
300	PPM	

DAY ON TEST	0	0	0	0	0
	0	0	0	0	0
	1	1	1	1	1
	5	5	5	5	5
A NIIMAA LID	0	0	0	0	0
ANIMAL ID	0	0	0	0	0
	0	0	0	0	0
	2	2	2	2	3
	6	7	8	9	0

\*TOTALS

**Alimentary System** 

NONE

**Cardiovascular System** 

NONE

**Endocrine System** 

NONE

**General Body System** 

NONE

**Genital System** 

Uterus +

**Hematopoietic System** 

NONE

**Integumentary System** 

NONE

**Musculoskeletal System** 

NONE

**Nervous System** 

NONE

- X ..Lesion present
- I ..Insufficient tissue

M ..Missing tissue

A .. Autolysis precludes evaluation

<sup>\* ..</sup>Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup> Tissue examined microscopically

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Test Compound: 4-Methylimidazole

**CAS Number:** 822-36-6

Date Report Requested: 10/22/2014 Time Report Requested: 06:25:42

First Dose M/F: NA / NA

Lab: MBA

Test Type: 14-DAY
Route: DOSED FEED
Species/Strain: Rat/F 344/N

F 344/N Rat Female 300 PPM

DAY ON TEST	0	0	0	0	0
	1	1	1	1	1
	1	1	1	1	1
	5	5	5	5	5
ANIMAL ID	0	0	0	0	0
AMIMAL ID	0	0	0	0	0
	0	0	0	0	0
	2	2	2	2	3
	6	7	8	9	0

\*TOTALS

**Respiratory System** 

NONE

**Special Senses System** 

NONE

**Urinary System** 

Kidney +

**SYSTEMIC LESIONS** 

Multiple Organ +

I ..Insufficient tissue

M ..Missing tissue

A .. Autolysis precludes evaluation

<sup>\* ..</sup>Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup> Tissue examined microscopically

X ..Lesion present

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Test Compound: 4-Methylimidazole

**CAS Number:** 822-36-6

Species/Strain: Rat/F 344/N

F 344/N Rat Female

**PPM** 

Test Type: 14-DAY

Route: DOSED FEED

DAY ON TEST 0

0 0 0 0 0 0 *1* 5 *1* 5 *1* 5 1 5 0 0 0 0 ANIMAL ID Ō 0 0

0 0 0 3 2 0 3 1 0 0 0 3 3 5 3

\*TOTALS

**Alimentary System** 

Liver 2

Cardiovascular System

NONE

800

**Endocrine System** 

NONE

**General Body System** 

NONE

**Genital System** 

NONE

**Hematopoietic System** 

NONE

**Integumentary System** 

NONE

**Musculoskeletal System** 

NONE

**Nervous System** 

NONE

- X .. Lesion present
- I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Date Report Requested: 10/22/2014 Time Report Requested: 06:25:42 First Dose M/F: NA / NA

Lab: MBA

<sup>\* ..</sup>Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup> Tissue examined microscopically

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Date Report Requested: 10/22/2014

Time Report Requested: 06:25:42

First Dose M/F: NA / NA

Lab: MBA

Test Compound: 4-Methylimidazole

**CAS Number:** 822-36-6

Species/Strain: Rat/F 344/N

PPM

Test Type: 14-DAY

Route: DOSED FEED

D

F 344/N Rat Female

AY ON TEST	0	0	0	0	0
	1 5	1 5	1 5	1 5	1 5
ANIMAL ID	0 0	0	0	0 0	0
	0	ŏ		0	-
	3 1	3 2	0 3 3	3 4	0 3 5

\*TOTALS

2

**Respiratory System** 

NONE

800

**Special Senses System** 

NONE

**Urinary System** 

NONE

**SYSTEMIC LESIONS** 

Multiple Organ

X ..Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

<sup>\* ..</sup>Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup> Tissue examined microscopically

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Test Compound: 4-Methylimidazole

**CAS Number:** 822-36-6

Date Report Requested: 10/22/2014 Time Report Requested: 06:25:42

First Dose M/F: NA / NA

Lab: MBA

Route: DOSED FEED
Species/Strain: Rat/F 344/N

Test Type: 14-DAY

F 344/N Rat Female 2500 PPM	DAY ON TEST  ANIMAL ID	0 0 1 5 0 0 0 3 6	0 0 1 5 0 0 0 0 3 7	0 0 1 5 0 0 0 3 8	0 0 1 5 0 0 0 0 3 9	0 0 1 5 0 0 0 4 0	*TOTALS
Alimentary System							
Liver Stomach, Forestomach Stomach, Glandular Cardiovascular System		+++++	+++++	+++++	+++++	+++++	5 5 5
Heart Endocrine System		+	+	+	+	+	5
Adrenal Cortex Adrenal Medulla Pituitary Gland Thyroid Gland General Body System		+ + + +	+ + + +	+ + + +	+ + + +	+ M + +	5 4 5 5
NONE Genital System							
Ovary Hematopoietic System		+	+	+	+	+	5
Spleen Thymus Integumentary System		+	+	+	+	+	5 5

M ..Missing tissue

A .. Autolysis precludes evaluation

 $<sup>^{\</sup>star}\,$  ..Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup>Tissue examined microscopically

X ..Lesion present

I .. Insufficient tissue

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Test Compound: 4-Methylimidazole

Date Report Requested: 10/22/2014

Time Report Requested: 06:25:42

First Dose M/F: NA / NA

Lab: MBA

CAS Number: 822-36-6

Route: DOSED FEED

F 344/N Rat Female

Test Type: 14-DAY

2500 PPM

Species/Strain: Rat/F 344/N

DAY ON TEST 0 0 0 0 0 *1* 5 *1* 5 *1* 5 5 0 0 0 0 0 3 7 ANIMAL ID Ō 0 0 3 6 0 0 3 3 4

\*TOTALS

5

5

5

NONE

**Musculoskeletal System** 

NONE

**Nervous System** 

Brain	+	+	+	+	+
Respiratory System					
Lung	+	+	+	+	+
Special Senses System					

NONE

**Urinary System** 

Kidney + + + + +

**SYSTEMIC LESIONS** 

Multiple Organ + + + + + 5

\*\* END OF REPORT \*\*

M ..Missing tissue

A .. Autolysis precludes evaluation

<sup>\* ..</sup>Total animals with tissue examined microscopically; Total animals with tumor

<sup>+ ..</sup> Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue